

Request for Advance or Reimbursement Solid Waste Reduction and Recycling Demonstration Grant Program

Form 8700-219 (R 11/02)

Notice: Information requested on this form is required for any payment request submitted pursuant to s. 287.25, Wis. Stats. The Department will not consider a request for payment unless this form is completed and signed by the authorized official. Personally identifiable information is not intended to be used for any other purpose.

Instructions: Submit one copy of this form to the DNR--Bureau of Community Financial Assistance.

Advance Payment: Complete items 1 through 6 and 8 only.

Final Reimbursement: Complete items 1 through 5, 7 and 8 and attach the following required documents.

1. Reimbursement Claim Worksheet. Form 8700-220.
2. Photocopy of vendor invoices, vouchers, and cancelled checks, front and back sides.
3. Copy of proposals, contracts and change orders (If not previously submitted).

Applicant

1. Grantee/Applicant	2. Project Number
3. DNR will use the mailing address we have on file.	4. Type of Report <input type="checkbox"/> Advance <input type="checkbox"/> Final
	5. County

Advance Payment Computation

6A. Approved Maximum State Grant Amount	\$	\$
6B. Advance Payment Percent	75%	
6C. Total Advance Payment Requested (Multiply 6A X 6B)	\$	

Leave Blank
DNR Use Only

Reimbursement Computation

7D. Total Expenditures	\$	
7E. Approved Cost Share Percent	50%	
7F. Multiply Amount on Line 7D by % on Line 7E		
7G. Approved Maximum State Grant Amount		
7H. Total State Share--Enter Lesser of Lines 7F or 7G		
7I. Less Advance Payment		
7J. Amount Requested for Reimbursement--Line 7H minus Line 7I	\$	\$

8. Certification

I certify that to the best of my knowledge and belief the eligible costs are in accordance with the terms of the project agreement and that all expenditures are based on actual payments of record.

Bureau CF Initial _____

Bureau Finance Initial _____

Date _____

Signature of Authorized Representative

Date Signed

Typed or Printed Name and Title

Telephone Number (include area code and extensions)